

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

10-706,612
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		1		51						
2				1		1	52						
3				3		2	53						
4				3		3	54						
5				4		4	55						
6				4		4	56						
7				2		2	57						
8				2		2	58						
9			1		1		59						
10			1		1		60						
11			1		1		61						
12					1		62						
13						1	63						
14						1	64						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.		4		5			TOTAL IND.						
TOTAL DEP.		18		21			TOTAL DEP.						
TOTAL CLAIMS		22		26			TOTAL CLAIMS						